

## WATER WELL REPORT

31/02-146, 20041

Application No. C-20041 P.

STATE OF WASHINGTON

(1) OWNER: Name CAMANO CITY Com. Club Address 1109 - S. Westmar, Place  
 (2) LOCATION OF WELL: County Island Campbell Island WA. 98298  
 Bearing and distance from section or subdivision corner LOT 13 - CAMANO #2 DIV. # ONE

(3) PROPOSED USE: Domestic ☒ Industrial ☐ Municipal ☐  
 Irrigation ☐ Test Well ☐ Other ☐

(4) TYPE OF WORK: Owner's number of well (if more than one) 6  
 New well ☒ Method: Dug ☐ Bored ☐  
 Deepened ☐ Cable ☐ Driven ☐  
 Reconditioned ☐ Rotary ☒ Jetted ☐

(5) DIMENSIONS: Diameter of well 6 inches.  
 Drilled 240 ft. Depth of completed well 240 ft.

## (6) CONSTRUCTION DETAILS:

Casing installed: " Diam. from ft. to ft.  
 Threaded ☐ " Diam. from ft. to ft.  
 Welded ☒ 6 " Diam. from 1 ft. to 240 ft.

Perforations: Yes ☐ No ☒  
 Type of perforator used.....  
 SIZE of perforations in. by in.  
 perforations from ft. to ft.  
 perforations from ft. to ft.  
 perforations from ft. to ft.

Screens: Yes ☒ No ☐ WADE NO. 1 KNOWN  
 Manufacturer's Name.....  
 Type..... Model No.....  
 Diam. 6 Slot size from ft. to ft.  
 Diam. Slot size from ft. to ft.

Gravel packed: Yes ☐ No ☐ Size of gravel:.....  
 Gravel placed from ft. to ft.

Surface seal: Yes ☒ No ☐ To what depth? ft.  
 Material used in seal Clay  
 Did any strata contain unusable water? Yes ☐ No ☒  
 Type of water?..... Depth of strata.....  
 Method of sealing strata off.....

(7) PUMP: Manufacturer's Name GOULD  
 Type: S.B. H.P. 1.0

(8) WATER LEVELS: Land-surface elevation 200 ft.  
 Static level 120 ft. below top of well Date 4/23/67  
 Artesian pressure lbs. per square inch Date.....  
 Artesian water is controlled by..... (Cap, valve, etc.)

(9) WELL TESTS: Drawdown is amount water level is lowered below static level  
 Was a pump test made? Yes ☒ No ☐ If yes, by whom? AL. KOWN  
 Yield: gal./min. with ft. drawdown after hrs.  
 " 175 " 50 " 4 "  
 " " " " "

Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level)

Time	Water Level	Time	Water Level	Time	Water Level
<u>VERY RAPID</u>					

Date of test 4/23/1967  
 Baller test gal./min. with ft. drawdown after hrs.  
 Artesian flow g.p.m. Date.....  
 Temperature of water 19°C Was a chemical analysis made? Yes ☒ No ☐

## (10) WELL LOG:

Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

MATERIAL	FROM	TO
<u>0-14 Liquid</u>	<u>1</u>	<u>14</u>
<u>GRAVEL + WATER</u>	<u>14</u>	<u>25</u>
<u>Sand + WATER</u>	<u>25</u>	<u>47</u>
<u>47-118 HARD PAN</u>	<u>47</u>	<u>118</u>
<u>Silt San + Sand</u>	<u>118</u>	<u>136</u>
<u>Brown clay + some water</u>	<u>136</u>	<u>175</u>
<u>GRAVEL + WATER</u>	<u>175</u>	<u>176</u>
<u>YELLOW Clay</u>	<u>176</u>	<u>207</u>
<u>YELLOW Sand</u>	<u>207</u>	<u>217</u>
<u>YELLOW Clay</u>	<u>217</u>	<u>220</u>
<u>Brown Sand + water</u>	<u>220</u>	<u>240</u>

Work started 4-1-67, 1967 Completed 4-23, 1967

## WELL DRILLER'S STATEMENT:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

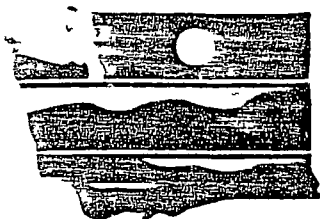
NAME CAMANO CITY COM CLUB  
 (Person, firm, or corporation) (Type or print)

Address 1109 - S. WESTMAR PL.

[Signed] Arthur Koch  
 (Well Driller) OWNER

License No. 2-26 Date 10-74

See COPY OF well driller's Report attached  
 also Exhibit A ATTACHED.



WASHINGTON STATE  
DEPARTMENT OF  
ECOLOGY

# Well Tagging Form

*SOI*

Unique Well Tag No: \_\_\_\_\_

AGA823

## RECORD VERIFICATION (check one)

- ☐ Well Report available (please attach this form to the well report and submit it to the Ecology Regional Office near you)
- ☐ Verification inconclusive
- ☐ Well Report not available

## WELL OWNERSHIP, IF DIFFERENT FROM WELL REPORT

First Name CAMPANO CITY CC INC

Last Name \_\_\_\_\_

Street Address \_\_\_\_\_

10590 - 0

City \_\_\_\_\_

State \_\_\_\_\_

## LOCATION OF WELL, IF DIFFERENT FROM WELL REPORT

Well Address \_\_\_\_\_

FALCON/FIR

City \_\_\_\_\_

County \_\_\_\_\_

T \_\_\_\_\_ N R \_\_\_\_\_ W M Sec \_\_\_\_\_

1/4 of the \_\_\_\_\_

## FOR AGENCY USE ONLY

Latitude \_\_\_\_\_

Longitude \_\_\_\_\_

Elevation at land surface \_\_\_\_\_ feet/meters (circle one)

Additional information, if available.

- ☐ GPS
- ☐ Topographic Map
- ☐ Survey
- ☐ Computer generated
- ☐ Digital Altimeter
- ☐ Topographic Map
- ☐ Other \_\_\_\_\_

☐ Location marked on topographic map (please attach)

☐ Location marked on air photo (please attach)

The Department of Ecology does NOT Warranty the Data and/or the Information on this Well Report.

FOR AGENCY USE ONLY

WELL CHARACTERISTICS

Physical Description of well (size or casing type of well housing etc)

6" CASING INSIDE WOOD, SLOPED HEAD HOUSE (~6' x 7' x 35')  
ATTACHED TO PM OF THE SAME ALL GREY W/WHITE TRIM  
LINK FENCE IN OPEN SITE

Location or Well identification Tag

*Casey*

Is supplemental tag needed for ease of identifying well?

☐

Yes

☒

No

Where was tag placed?

D	C	B	A
-----			
E	F	G	H
-----			
I	L	K	J
-----			
M	P	Q	R

Scale 1 24 000 (1' = 2 000')

Indicate the location of the well within the Section by drawing a dot at that point.

SECTION \_\_\_\_\_

Comments

FOR ECOLOGY WATER RESOURCES PROGRAM ONLY

Right # \_\_\_\_\_

Date Issued \_\_\_\_\_

One Application Permit Certificate Claim Exempt